

Jen Green Testimony in Support of House Bill 4531

Hello, my name is Dr Jen Green and I am a Naturopathic Physician. I live in West Bloomfield, MI and work in Bloomfield Twp. I did my undergraduate degree at McMaster University, and completed naturopathic medical school at the Canadian College of Naturopathic Medicine in Toronto, which is a four year full time graduate program accredited by NABNE (the North American Board of Naturopathic Examiners). There are currently two accredited Naturopathic Medical schools in Canada and 6 accredited schools in the United States. All of these schools focus on Evidence-Based Complementary and Alternative Medicine (EBCAM). The closest Naturopathic medical school to here is in Chicago at the National University of Health Sciences.

All Naturopathic Physicians, like myself, have completed pre-med requirements, a four year full time graduate level program (with roughly 4600 hours of training), and then completed North American wide Licensing Exams (Boards) in order to qualify for a license. I currently carry a license in New Hampshire, because there is no licensing available in Michigan. I complete 45 hours of mandatory continuing education, 12 of which are in pharmacology/pharmacognosy. There are currently 18 states and 2 territories that license Naturopathic Physicians. Federally, we are recognized as primary care providers with prescription rights. We hope to add Michigan to this list ☺

After practicing in Toronto for 4 years, I moved to Michigan with my husband and have been practicing here now for 12 years. I was hired at Beaumont Royal Oak in 2006 and worked there for almost six years in the Rose Cancer Center so that they could have a herb-drug expert on staff to help deal with the complex issues that arise in cancer care. Oncologists wanted someone in house to provide guidance for patients on how to safely integrate natural medicine into their conventional care plans. The National Institutes of Health reports that complementary and alternative use by cancer patients is roughly 80%ⁱ. Most patients get their advice on herbs and supplements from well meaning family members and health food store clerks who do not have training in how cancer therapies work or how they might interact with herbs and supplements, or with other medications patients are taking. For this reason, Beaumont is one of over 26 hospitals in the U.S. that staff naturopathic doctorsⁱⁱ. The reason we as Naturopathic Physicians are hired so frequently by hospital systems is that we are trained to be a bridge between conventional medicine and natural medicine, and because we are the most highly educated professionals in the field of natural medicine.

Our legislative bill is designed to clarify that a Naturopathic Physician, or Naturopathic Doctor, is someone who has completed a 4 year accredited program, has been trained in conventional medical diagnosis, and has passed their board exams. This bill does not seek to limit in any way the scope of other natural practitioners or limit their current business practices. What this bill does do, is help consumers to differentiate between a Naturopathic Doctor - who has extensive training in medical diagnosis as well as natural agents - from someone who is trained in natural therapies alone. I refer to traditional herbalists and traditional naturopaths who I believe provide

excellent care to our shared patients. But this care is very different from the care given by someone like myself who is trained as a naturopathic doctor.

While there are many studies showing the effectiveness of individual herbs or supplements, there are two studies I would like to quickly highlight that show how a combined approach, such as is used in Naturopathic Medicine, is particularly effective.

1. In a randomized controlled trial, Naturopathic Medicine (acupuncture with relaxation techniques and dietary recommendations) was compared to physiotherapy for low back pain. Participants in the Naturopathic care group reported significantly lower back pain (-6.89, 95% CI. -9.23 to -3.54, $p = <0.0001$). Quality of life was significantly improved in the group receiving Naturopathic care in all domains except for vitalityⁱⁱⁱ.
2. In a randomized controlled trial of Naturopathic Medicine (dietary counseling, deep breathing relaxation techniques, a multi-vitamin, and the herb ashwagandha) was compared to standard psychotherapy for treatment of anxiety. Naturopathic care decreased anxiety compared to psychotherapy, and there were also significant improvements in secondary quality of life measures^{iv}.

The last two studies I would like to share demonstrate the cost effectiveness of Naturopathic Medicine:

3. The Vermont Automobile Dealers Association (VADA) study (Appendix G of the legislative packets) showed that when 848 employees were advised by naturopathic physicians for one year, the incidence of high blood pressure dropped 36%, incidence of diabetes dropped 13% , obesity fell by 15%, high cholesterol fell 17% , high risk stress fell 24% and the Vermont Automobile Dealers Association saved: \$315,000 in direct health care costs , \$1,145,000 in indirect health care costs (absenteeism, low-productivity, etc.) and almost \$1,500,000 in total health care costs.
4. In a randomized controlled trial of Naturopathic Medicine to reduce cardiovascular risk, the naturopathic intervention decreased risk of cardiovascular disease by one third and risk of CVD death was by half (number needed to treat = 30). These risk reductions came with average net study-year savings of \$1138 per person in societal costs and \$1187 in employer costs^v.

There is a huge demand for natural medicine in Michigan, for cost effective medicine and for a combined approach like the studies of Naturopathic Medicine I just described. This bill will help meet this public demand for Naturopathic services by allowing Naturopathic Physicians to come and legally practice here. NOT licensing Naturopathic Physicians actually prevents Michigan residents from having access to the most highly educated professionals in the field of natural medicine.

ⁱ Hulbocky FJ, Ratain MJ, Wen M, Daugherty CK. Complementary and alternative medicine among advanced cancer patients enrolled on phase I trials: a study of prognosis, quality of life, and preferences for decision making. *J Clin Oncol* 2007;25(5):548–54.

Swarup AB, Barrett W, Jazieh AR. The use of complementary and alternative medicine by

cancer patients undergoing radiation therapy. *Am J Clin Oncol* 2006;29(5):468–73.

Yates JS, Mustian KM, Morrow GR, et al. Prevalence of complementary and alternative medicine use in cancer patients during treatment. *Support Care Cancer* 2005;13(10): 806

ⁱⁱ West, K. Roy, S. Hospital Based Practices. [Residency Objectives], Eastern Regional Medical Center. 2010.

ⁱⁱⁱ <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1976391/>

^{iv} <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2729375/>

^v <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3921268/>